

**Amendments to the Specification:**

Please replace the paragraph beginning at page 7, line 1, with the following rewritten paragraph:

--Referring initially to FIGS. 1-4, one preferred embodiment of a tissue removal device in accordance with the present disclosure, is shown generally as 10. Device 10 includes a bag assembly 15, a shaft 30, a control ~~system~~ portion 60 and desirably includes a breakaway sheath 50. Shaft 30 defines a longitudinal axis "A". Bag assembly 15 includes a bag support structure or bag support 20 and a bag 40 operatively attached to bag support 20.--

Please replace the paragraph beginning at page 8, line 19, with the following rewritten paragraph:

--Shaft or pusher 30 has a distal end portion 32 and a proximal end portion 34. Bag assembly 15 is operatively connected with distal end portion 32, such as, by connecting bag support 20 to distal end portion 32 of shaft 30. The shaft 30 is desirably formed from a polymeric material, but may be formed from any medical grade material. As seen in FIG. 1, ~~The~~ the shaft 30 is slidably received in a tube 31, as discussed in U.S. Patent Nos. 5,647,372 and 5,465,731, the disclosures of which are entirely incorporated by reference herein. Control portion 60 (symbolically shown) is connected to proximal end portion 34 for positioning, manipulating and orienting bag support 20 and bag 40 during surgery. Initially, bag assembly 15 is disposed within the tube 31 and bag 40 is disposed on bag support 20 and contained in a sheath 50. Shaft 30 is used to position sheathed bag assembly ~~51~~ 15 through the reduced diameter trocar and manipulate bag assembly 15 to the first or open position during minimally invasive surgery. The structure of shaft 30, operational deployment of bag assembly 15 and associated structure are described in commonly

owned U.S. Patent No. 5,647,372 entitled "Specimen Retrieval Pouch and Method of Use" and U.S. Patent No. 5,465,731 entitled "Specimen Retrieval Pouch and Method of Use," both of which are incorporated entirely herein by reference. When shaft 30 is advanced through the tube using control portion 60, the control portion 60 is manipulated so that bag support 20 exits the tube. Shaft 30 can have a distal end 32 portion configured to bend or have a hinged connection, for example, which is manipulatable from control portion 60 and facilitates orientation of bag 30 after bag assembly 15 has been introduced into the body for receiving tissue portions and any other specimens therein.--

Please replace the paragraph beginning at page 16, line 13, with the following rewritten paragraph:

--After being passed through the trocar during minimally invasive surgery, first end 42 of bag 40 can be slid along bag support 20 toward proximal end 24, concurrent with or prior to the expansion of bag support 20, by a cord 57. The cord is desirably deployed at control portion 60. In the alternative, bag 40 could be biased to slide toward distal end 22 concurrent with the expansion of bag support 20 to the first position. The slot 43 is desirably closed after bag assembly 20 has expanded by further drawing control ~~lines~~ cords 57 proximally such that the sides of slot 43 are brought together and slot 43 is closed. In further embodiments, the bag opening 25 may be closed using cord 57 or a separate suture, cord or line.--